

Colorado Secretary of State
Elections Division
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Space Below For Office Use Only

REPORT OF CONTRIBUTIONS AND EXPENDITURES

Article XXVIII of the Colorado Constitution and Tital 1, Article 45 of the Colorado Revised Statute (C.R.S.)

Full Name of Committee/Person:	CHERYL WINK FOR ENGLENWOOD CITY COUNCIL
As Shown On Registration	
Address of Committee/Person:	2980 S. ELATI STREET
City, State & Zip Code:	ENGLENWOOD, CO 80110
Committee Type:	
Name and Address of Financial Institution	BANK SNB 3531 S. LOGAN ST, STEA ENGLENWOOD CO 80113

Type of Report

Pre-election Reports

☒ 10/17/17, 5:00 p.m. (21 days prior to election)
Reporting period: from the beginning of the initial filing through October 12, 2017

☐ 11/3/17, 5:00 p.m.
Reporting period: from October 13, 2017 through October 29, 2017

Post-election Reports

☐ 12/7/17, 5:00 p.m. (30 days following election)
Reporting period: from October 30, 2017 through December 2, 2017

☐ Annual (November 1, 2018, 5:00 p.m.)
[This additional filing is required, if your December 2, 2017 filing does not reflect a zero balance.]
Reporting period: from December 3, 2017 through October 27, 2018

Is this Report an Amendment?

☐ Yes ☒ No
This amends the filing of (date) _____
[Submit changes or new information only.]

Termination Report

[Termination Report MUST have a ZERO balance.]
☐ Date _____

		Totals Detailed Summary Page
1	Funds on Hand at the Beginning of Reporting Period (monetary only)	\$ 0
2	Total Monetary Contributions (line 11)	\$ 6177.24
3	Total of Monetary Contributions & Beginning Amount (line 1 + line 2)	\$ 6177.24
4	Total Monetary Expenditures (line 19)	\$ 5188.70
5	Funds on Hand at the End of Reporting Period (monetary) (line 3 - line 4)	\$ 988.54

The appropriate officer shall impose a penalty of \$50 per day for each day that a report is filed late.
[Art. XXVIII Sec. 10(2)(a)]

Authorization (Must be completed by either the Registered Agent OR the Candidate): I hereby certify and declare, under penalty of perjury, that to the best of my knowledge or belief all contributions received during this reporting period, including any contributions received in the form of membership dues transferred by a membership organization, are from permissible sources.

Print Registered Agent's Name: CHERYL WINK

Registered Agent's Signature: [Redacted]

Date: 10/17/2017

Print Candidate Name: CHERYL WINK

Candidates Signature: [Redacted]

Date: 10/17/2017

DETAILED SUMMARY

Full Name of Committee/Person: CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

Current Reporting Period: BEGINNING Through OCTOBER 12, 2017

Funds on hand at the beginning of reporting period (Monetary Only)		\$ 0
6	Itemized Contributions \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "A")	\$ 6106.25
7	Total of Non-Itemized Contributions (Contributions of \$19.99 and Less)	\$ 70.99
8	Loans Received (From Schedule "C")	\$ 0
9	Total of Other Receipts (Interest, Dividends, etc.)	\$ 0
10	Returned Expenditures (from recipient) (From Schedule "D")	\$ 0
11	Total Monetary Contributions (Total of lines 6 through 10)	\$ 6177.24
12	Total Non-Monetary Contributions (From Statement of Non-Monetary Contributions)	\$ 1050.00
13	Total Contributions (Line 11 + line 12)	\$ 7227.24
14	Itemized Expenditures \$20 or More [C.R.S. 1-45-108(1)(a)] (From Schedule "B")	\$ 5129.22
15	Total of Non-Itemized Expenditures (Expenditures of \$19.99 or Less)	\$ 59.48
16	Loan Repayments Made (From Schedule "C")	\$ 0
17	Returned Contributions (To donor) (Please list on Schedule "D")	\$ 0
18	Total Coordinated Non-Monetary (in-kind) Expenditures (Candidate/Candidate Committee & Political Parties only)	\$
19	Total Monetary Expenditures (Total of lines 14 through 17)	\$ 5188.70
20	Total Spending (Line 18 + line 19)	\$ 5188.70

Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person:

CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/8/17	4. Name (Last, First): <u>WINK, Cheryl</u>
2. <u>Contribution Amt.</u> \$ <u>200.00</u>	5. Address: <u>2980 S. Eliot St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>Personal Contribution</u>
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory): <u>Software Architect</u>

1. <u>Date Accepted</u> 8/30/17	4. Name (Last, First): <u>Anderson, Janice</u>
2. <u>Contribution Amt.</u> \$ <u>500.00</u>	5. Address: <u>16101 Tonkawood Court</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Minnetonka, MN 55345</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory): <u>Wells Fargo Bank</u>
	9. Occupation (if applicable, mandatory): <u>VP client services</u>

1. <u>Date Accepted</u> 8/30/17	4. Name (Last, First): <u>Russell, Rita</u>
2. <u>Contribution Amt.</u> \$ <u>20.00</u>	5. Address: <u>2216 E. Dartmouth circle</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. <u>Date Accepted</u> 8/30/17	4. Name (Last, First): <u>Reeves, Greta</u>
2. <u>Contribution Amt.</u> \$ <u>20.00</u>	5. Address: <u>9943 Apollo Bay way</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Highlands Ranch, CO 80130</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule A – Itemized Contributions Statement (\$20 or more)

1

Full Name of Committee/Person: CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

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PLEASE PRINT/TYPE

1. Date Accepted <u>9/11/17</u>	4. Name (Last, First): <u>WINK, Jeremy</u>
2. Contribution Amt. \$ <u>1000.00</u>	5. Address: <u>2980 S. Elati St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Emily Griffith Technical college</u>
	9. Occupation (if applicable, mandatory): <u>Veteran Services</u>

1. Date Accepted <u>9/10/17</u>	4. Name (Last, First): <u>Freidman, Chiles</u>
2. Contribution Amt. \$ <u>20.00</u>	5. Address: <u>3786 S. Acoma St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>9/10/17</u>	4. Name (Last, First): <u>Vacca, Tim</u>
2. Contribution Amt. \$ <u>40.00</u>	5. Address: <u>5200 Lakeshore Dr.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Bowmar, CO 80123</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>MUSEUM OF OUTDOOR ARTS</u>
	9. Occupation (if applicable, mandatory): <u>PROGRAM DIRECTOR</u>

1. Date Accepted <u>9/10/17</u>	4. Name (Last, First): <u>Jouett, Rhy</u>
2. Contribution Amt. \$ <u>60.00</u>	5. Address: <u>2814 Humboldt</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Denver, CO 80205</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): <u>SOFTWARE ENGINEER</u>

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person:

CHERYL WINK FOR ENGLENWOOD CITY COUNCIL

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. Date Accepted 9/10/17	4. Name (Last, First): Glose, Jim
2. Contribution Amt. \$ 20.00	5. Address: 3255 S. PEARL ST.
3. Aggregate Amt. * \$	6. City/State/Zip: ENGLEWOOD, CO
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted 9/10/17	4. Name (Last, First): Wallace, Dave
2. Contribution Amt. \$ 20.00	5. Address: 2885 E. Midway Blvd #455
3. Aggregate Amt. * \$	6. City/State/Zip: Denver, CO 80234
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted 10/6/17	4. Name (Last, First): Cullinan, CJ
2. Contribution Amt. \$ 50.00	5. Address: 1501 E. Dartmouth Ave.
3. Aggregate Amt. * \$	6. City/State/Zip: Englewood, CO 80113
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory):
	9. Occupation (if applicable, mandatory):

1. Date Accepted 10/6/17	4. Name (Last, First): Schmidtkofer, Paul
2. Contribution Amt. \$ 500.00	5. Address: 11915 E. Harvard Ave #108
3. Aggregate Amt. * \$	6. City/State/Zip: Aurora, CO 80014
<input type="checkbox"/> Check box if Electioneering Communication	7. Description:
	8. Employer (if applicable, mandatory): Alchemy Salon
	9. Occupation (if applicable, mandatory): owner

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person: CHERYL NINK FOR ENGLEWOOD CITY COUNCIL

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PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 9/19/17	4. Name (Last, First): <u>Robinson, Josh</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>801 Englewood, PKwy #B 312</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Red cross</u>
	9. Occupation (if applicable, mandatory): <u>UI Dev</u>

1. <u>Date Accepted</u> 9/10/17	4. Name (Last, First): <u>Zierke, Phil</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>3435 S. BROADWAY</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ENGLEWOOD, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>THE ENGLEWOOD GRAND</u>
	9. Occupation (if applicable, mandatory): <u>OWNER</u>

1. <u>Date Accepted</u> 9/10/17	4. Name (Last, First): <u>Zierke, Erika</u>
2. <u>Contribution Amt.</u> \$ 100.00	5. Address: <u>3435 S. BROADWAY</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ENGLEWOOD, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>THE ENGLEWOOD GRAND</u>
	9. Occupation (if applicable, mandatory): <u>OWNER</u>

1. <u>Date Accepted</u> 9/10/17	4. Name (Last, First): <u>Fohn, Tim</u>
2. <u>Contribution Amt.</u> \$ 20.00	5. Address: <u>3270 S. Penn St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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Schedule A - Itemized Contributions Statement (\$20 or more)

1

Full Name of Committee/Person: CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

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PLEASE PRINT/TYPE

1. Date Accepted <u>10/6/17</u>	4. Name (Last, First): <u>Turner, Ben</u>
2. Contribution Amt. \$ <u>150.00</u>	5. Address: <u>1865 Sussex st.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Lafayette, CO 80026</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): <u>Welltok</u>
	9. Occupation (if applicable, mandatory): <u>Server Master</u>

1. Date Accepted <u>10/6/17</u>	4. Name (Last, First): <u>Betancourt, Rodolfo</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>4651 S. Jason st.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/6/17</u>	4. Name (Last, First): <u>Betancourt, Rebecca</u>
2. Contribution Amt. \$ <u>50.00</u>	5. Address: <u>4651 S. Jason St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

1. Date Accepted <u>10/6/17</u>	4. Name (Last, First): <u>Perez, Marcos</u>
2. Contribution Amt. \$ <u>20.00</u>	5. Address: <u>4710 S. Washington St.</u>
3. Aggregate Amt. * \$	6. City/State/Zip: <u>Englewood, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, mandatory): _____
	9. Occupation (if applicable, mandatory): _____

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person: CHERIL WINK FOR ENGLEWOOD CITY COUNCIL

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PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>10/6/17</u>	4. Name (Last, First): <u>Rogalla, Paul</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>4541 S. Washington St.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>Englewood, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>City and county of Denver</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>GIS ANALYST</u>

1. <u>Date Accepted</u> <u>9/24/17</u>	4. Name (Last, First): <u>MIDTBO, ANGELA</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>305 S. DOWNING ST.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DENVER, CO 80209</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>BLACKBIRD, ROSEDALE, ATTICUS</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>OWNER</u>

1. <u>Date Accepted</u> <u>9/25/17</u>	4. Name (Last, First): <u>DEFRANCO, JENNIFER</u>
2. <u>Contribution Amt.</u> \$ <u>100.00</u>	5. Address: <u>1190 W. KRAHL COURT</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>PALATINE, IL 60067</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>MAGICAL VACATION PLANNER</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>TRAVEL SPECIALIST</u>

1. <u>Date Accepted</u> <u>9/25/17</u>	4. Name (Last, First): <u>GARCIA, DANNY</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>1430 ADDIE DRIVE</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ORLANDO, FLORIDA 32818</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person:

CHEERL WINK FOR ENGLEWOOD CITY COUNCIL

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PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>9/27/17</u>	4. Name (Last, First): <u>MARTINEZ, JOSETTE</u>
2. <u>Contribution Amt.</u> \$ <u>35.00</u>	5. Address: <u>5444 ZEPHYR ST. UNIT 201</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ARVADA, CO 80002</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>9/28/17</u>	4. Name (Last, First): <u>GOETZKE, SARA</u>
2. <u>Contribution Amt.</u> \$ <u>35.00</u>	5. Address: <u>1699 N. DOWNING ST. #203</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>DENVER, CO 80218</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>9/29/17</u>	4. Name (Last, First): <u>FRIZZO, LATINEE</u>
2. <u>Contribution Amt.</u> \$ <u>30.00</u>	5. Address: <u>1300 WHITE OAK TRAIL</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>GODFREY, IL 60205</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>PRODUCER + FILM WRITER</u>

1. <u>Date Accepted</u> <u>9/29/17</u>	4. Name (Last, First): <u>RUNDLE, JOHN</u>
2. <u>Contribution Amt.</u> \$ <u>20.00</u>	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>SAMMAMISH, WA</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>AMAZON WEB SERVICES</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>SOFTWARE DEVELOPER</u>

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person: CHERIL WINK FOR ENGLEWOOD CITY COUNCIL

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>9/29/17</u>	4. Name (Last, First): <u>FOWLER, THAD</u>
2. <u>Contribution Amt.</u> \$ <u>25.00</u>	5. Address: _____
3. <u>Aggregate Amt. *</u> \$ _____	6. City/State/Zip: <u>SAN FRANCISCO, CA</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>9/30/17</u>	4. Name (Last, First): <u>LACY, BRETT</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>1061 WYLYE ST, S.E.</u>
3. <u>Aggregate Amt. *</u> \$ _____	6. City/State/Zip: <u>ATLANTA, GA 30316</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>9/29/17</u>	4. Name (Last, First): <u>KEY, DAVID</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>25 BEATRIX PLACE</u>
3. <u>Aggregate Amt. *</u> \$ _____	6. City/State/Zip: <u>BRISTOL BS7 4AE UK</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>10/1/17</u>	4. Name (Last, First): <u>OZER, CAGLAR</u>
2. <u>Contribution Amt.</u> \$ <u>300.00</u>	5. Address: <u>6505 S. HARVEST ST.</u>
3. <u>Aggregate Amt. *</u> \$ _____	6. City/State/Zip: <u>AURORA, CO 80016</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): <u>SSB</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>WEB DEV</u>

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Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person:

CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

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PLEASE PRINT/TYPE

1. <u>Date Accepted</u> <u>8/14/17</u>	4. Name (Last, First): <u>WINK, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>99.00</u>	5. Address: <u>2980 S. ELATI ST.</u>
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>8/14/17</u>	4. Name (Last, First): <u>WINK, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>50.00</u>	5. Address: <u>2980 S. ELATI ST.</u>
3. <u>Aggregate Amt. *</u> \$ <u>149.00</u>	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>8/24/17</u>	4. Name (Last, First): <u>WINK, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>199.00</u>	5. Address: <u>2980 S. ELATI ST.</u>
3. <u>Aggregate Amt. *</u> \$ <u>348.00</u>	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> <u>8/29/17</u>	4. Name (Last, First): <u>WINK, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>751.54</u>	5. Address: <u>2980 S. ELATI ST.</u>
3. <u>Aggregate Amt. *</u> \$ <u>1099.54</u>	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule A – Itemized Contributions Statement (\$20 or more)

Full Name of Committee/Person: CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

WARNING: Please read the instruction page for Schedule "A" before completing!

PLEASE PRINT/TYPE

1. <u>Date Accepted</u> 8/29/17	4. Name (Last, First): <u>WINK, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>155.72</u>	5. Address: <u>2980 S. ELATI ST.</u>
3. <u>Aggregate Amt. *</u> \$ <u>1255.26</u>	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 9/1/17	4. Name (Last, First): <u>WINK, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>244.06</u>	5. Address: <u>2980 S. ELATI ST.</u>
3. <u>Aggregate Amt. *</u> \$ <u>1499.32</u>	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u> 9/1/17	4. Name (Last, First): <u>WINK, CHERYL</u>
2. <u>Contribution Amt.</u> \$ <u>671.93</u>	5. Address: <u>2980 S. ELATI ST.</u>
3. <u>Aggregate Amt. *</u> \$ <u>2171.25</u>	6. City/State/Zip: <u>ENGLEWOOD, CO 80110</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

1. <u>Date Accepted</u>	4. Name (Last, First): _____
2. <u>Contribution Amt.</u> \$	5. Address: _____
3. <u>Aggregate Amt. *</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____

* For contribution limits within a committee's election cycle or contribution cycle, please refer to the following Colorado Constitutional cites: Candidate Committee Art. XXVIII, Sec. 2(6); Political Party Art. XXVIII, Sec. 3(3); Political Committee Art. XXVIII, Sec. 3(5); Small Donor Committee Art. XXVIII, Sec. 2(14).

Schedule B – Itemized Expenditures Statement (\$20 or more)
[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

PLEASE PRINT/TYPE

1. Date Expended
8/23/17

2. Amount
\$ 32.72

3. Recipient is (optional):
☐ Committee
☒ Non-Committee

4. Name: BANK SNB

5. Address: 3531 S. LOGAN ST

6. City/State/Zip: ENGLEWOOD, CO 80113

7. Purpose of Expenditure: CAMPAIGN CHECK ORDER

☐ Check box if Electioneering Communication

1. Date Expended
9/11/17

2. Amount
\$ \$85.80

3. Recipient is (optional):
☐ Committee
☒ Non-Committee

4. Name: GIGI'S CUPCAKES

5. Address: 7301 S. SANTA FE DR., #625

6. City/State/Zip: LITTLETON, CO 80120

7. Purpose of Expenditure: EVENT FOOD

☐ Check box if Electioneering Communication

1. Date Expended
9/18/17

2. Amount
\$ 157.00

3. Recipient is (optional):
☐ Committee
☒ Non-Committee

4. Name: VIVID DESIGN WORKS

5. Address: 15428 BARTON COUNTY BLVD

6. City/State/Zip: JASPER, MO 64755

7. Purpose of Expenditure: BUMPER STICKERS

☐ Check box if Electioneering Communication

1. Date Expended
9/27/17

2. Amount
\$ 243.21

3. Recipient is (optional):
☐ Committee
☒ Non-Committee

4. Name: VISTAPRINT

5. Address: 275 WYMAN ST.

6. City/State/Zip: WALTHAM, MA 02451

7. Purpose of Expenditure: FLYERS

☐ Check box if Electioneering Communication

1. Date Expended
10/2/17

2. Amount
\$ 479.57

3. Recipient is (optional):
☐ Committee
☒ Non-Committee

4. Name: SIGNS ON THE CHEAP

5. Address: 11525A STONEHOLLOW DRIVE, STE 100

6. City/State/Zip: AUSTIN, TX 78758

7. Purpose of Expenditure: YARD SIGNS

☐ Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)
[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: CHERYL WINK FOR ENGUEWOOD CITY COUNCIL

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>10/5/17</u>	4. Name: <u>HALEY SENIOR REC. CTR</u>
2. <u>Amount</u> \$ <u>47.50</u>	5. Address: <u>3380 S. LINCOLN ST.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ENGUEWOOD, CO 80113</u>
	7. Purpose of Expenditure: <u>EVENT ROOM RENTAL</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/5/17</u>	4. Name: <u>SIGNS DIRECT</u>
2. <u>Amount</u> \$ <u>38.90</u>	5. Address: <u>410 E. LAFAYETTE ST., STE 1</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>BLOOMINGTON ILL 61701</u>
	7. Purpose of Expenditure: <u>YARD SIGN + STAKES</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/10/17</u>	4. Name: <u>PRINT PLACE</u>
2. <u>Amount</u> \$ <u>1,776.40</u>	5. Address: <u>1130 AVE H EAST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ARLINGTON, TX 76011</u>
	7. Purpose of Expenditure: <u>MAILER POSTCARD + POSTAGE</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/11/17</u>	4. Name: <u>KING SCOOPERS</u>
2. <u>Amount</u> \$ <u>24.73</u>	5. Address: <u>101 ENGUEWOOD PKWY</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ENGUEWOOD, CO 80110</u>
	7. Purpose of Expenditure: <u>EVENT FOOD + DECOR</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>10/11/17</u>	4. Name: <u>KING SCOOPERS</u>
2. <u>Amount</u> \$ <u>72.14</u>	5. Address: <u>101 ENGUEWOOD PKWY</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ENGUEWOOD, CO 80110</u>
	7. Purpose of Expenditure: <u>EVENT CAKE + REFRESHMENTS</u> <input type="checkbox"/> Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)
[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

PLEASE PRINT/TYPE

1. Date Expended <u>8/14/17</u>	4. Name: <u>WORD PRESS</u>
2. Amount \$ <u>99.00</u>	5. Address: <u>60 29TH ST.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>SAN FRANCISCO, CA 94110</u>
	7. Purpose of Expenditure: <u>WEBSITE</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/14/17</u>	4. Name: <u>WORD PRESS</u>
2. Amount \$ <u>50.00</u>	5. Address: <u>60 29TH ST.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>SAN FRANCISCO, CA 94110</u>
	7. Purpose of Expenditure: <u>WEBSITE</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/24/17</u>	4. Name: <u>WORD PRESS</u>
2. Amount \$ <u>199.00</u>	5. Address: <u>60 29TH ST.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>SAN FRANCISCO, CA 94110</u>
	7. Purpose of Expenditure: <u>WEBSITE</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/29/17</u>	4. Name: <u>SIGNS ON THE CHEAP</u>
2. Amount \$ <u>751.54</u>	5. Address: <u>11525A STONEHOLLOW DRIVE, STE. 100</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>AUSTIN, TX 78758</u>
	7. Purpose of Expenditure: <u>YARD SIGNS</u> <input type="checkbox"/> Check box if Electioneering Communication

1. Date Expended <u>8/29/17</u>	4. Name: <u>SIGNS DIRECT</u>
2. Amount \$ <u>155.72</u>	5. Address: <u>410 E. LAFAYETTE ST., STE 1</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>BLOOMINGTON, IL 61701</u>
	7. Purpose of Expenditure: <u>YARD SIGN 'H STAKES'</u> <input type="checkbox"/> Check box if Electioneering Communication

Schedule B – Itemized Expenditures Statement (\$20 or more)
[1-45-108(1)(a), C.R.S.]

Full Name of Committee/Person: CHERYL WINK FOR ENGLEWOOD CITY COUNCIL

PLEASE PRINT/TYPE

1. <u>Date Expended</u> <u>9/11/17</u>	4. Name: <u>SIGNAL GRAPHICS</u>
2. <u>Amount</u> \$ <u>244.06</u>	5. Address: <u>5120 S. BROADWAY ST.</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ENGLEWOOD, CO 80113</u>
	7. Purpose of Expenditure: <u>DOOR HANGERS</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u> <u>9/11/17</u>	4. Name: <u>PRINT PLACE</u>
2. <u>Amount</u> \$ <u>671.93</u>	5. Address: <u>1130 AVE # EAST</u>
3. Recipient is (optional): <input type="checkbox"/> Committee <input checked="" type="checkbox"/> Non-Committee	6. City/State/Zip: <u>ARLINGTON, TX 76011</u>
	7. Purpose of Expenditure: <u>DOOR HANGERS</u> <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$ _____	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$ _____	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

1. <u>Date Expended</u>	4. Name: _____
2. <u>Amount</u> \$ _____	5. Address: _____
3. Recipient is (optional): <input type="checkbox"/> Committee <input type="checkbox"/> Non-Committee	6. City/State/Zip: _____
	7. Purpose of Expenditure: _____ <input type="checkbox"/> Check box if Electioneering Communication

Statement of Non-Monetary Contributions
[Art. XXVIII, Sec. 2(5)(a)(II)(III) & Sec. 5(3) & 1-45-108(1), C.R.S.]

Full Name of Committee/Person: CHERYL WINK FOR ENGUEWOOD CITY COUNCIL

PLEASE PRINT/TYPE

1. <u>Date Provided</u> 8/24/17	4. Name (Last, First): <u>PIONEK, LAURA</u>
2. <u>Fair Market Value</u> \$ 525.00	5. Address: <u>3450 FOXRIDGE TRAIL</u>
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: <u>HIGHLANDS RANCH, CO 80126</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>DESIGNED MATERIALS</u>
	8. Employer (if applicable, <u>mandatory</u>): <u>LISTENMD</u>
	9. Occupation (if applicable, <u>mandatory</u>): <u>DIRECTOR, UX/UI DESIGN</u>
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

1. <u>Date Provided</u> 10/3/17	4. Name (Last, First): <u>PEREZ, MARCOS</u>
2. <u>Fair Market Value</u> \$ 525.00	5. Address: <u>4170 S. WASHINGTON ST.</u>
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: <u>ENGUEWOOD, CO 80113</u>
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: <u>DESIGNED MATERIALS</u>
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): <u>SENIOR GRAPHIC DESIGNER</u>
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

1. <u>Date Provided</u>	4. Name (Last, First): _____
2. <u>Fair Market Value</u> \$	5. Address: _____
3. <u>Aggregate Amt.</u> \$	6. City/State/Zip: _____
<input type="checkbox"/> Check box if Electioneering Communication	7. Description: _____
	8. Employer (if applicable, <u>mandatory</u>): _____
	9. Occupation (if applicable, <u>mandatory</u>): _____
10. <input type="checkbox"/> Check box if Coordinated with a Candidate/Candidate Committee or Political Party. *	

* Note: If coordinated, then contribution must also be reported as a non-monetary expenditure on Detailed Summary. Art. XXVIII, Sec. 2(9) states: "...Expenditures that are controlled by or coordinated with a candidate or candidate's agent are deemed to be both contributions by the maker of the expenditures, and expenditures by the candidate committee."